

13 CV 8117

UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORKTashon Spurgeon  
# 990-13-00006

(In the space above enter the full name(s) of the plaintiff(s).)

## COMPLAINT

under the

Civil Rights Act, 42 U.S.C. § 1983

(Prisoner Complaint)

-against-

WARDEN Stephen Wettenstein  
C.O. MASONDeputy PATTERSONDeputy ARBYDeputy WilliamsCaptain MOORECaptain PITTMANCaptain HURLENCaptain REIDCaptain MOORE / Captain AdamsJury Trial: ☒ Yes ☐ No

(check one)

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

## I. Parties in this complaint:

- A. List your name, identification number, and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff

Name

Tashon Spurgeon

ID #

990-13-00006

Current Institution

O.B.C.C.

Address

1600 Hazen Street  
East Elmhurst, N.Y. 11370

- B. List all defendants' names, positions, places of employment, and the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1

Name

Warden Stephen Wettenstein

Shield #

Where Currently Employed

OTIS BARTON Correctional Center

Address

1600 Hazen Street  
East Elmhurst, N.Y. 11370

Defendant No. 2

Name C.D. MASON Shield #  
 Where Currently Employed OTIS BANTUM CORRECTIONAL CENTER  
 Address 1600 HAZEN STREET  
EAST ELMHURST N.Y. 11370

Defendant No. 3

Name DEPUTY PATTERSON Shield #  
 Where Currently Employed OTIS BANTUM CORRECTIONAL CENTER  
 Address 1600 HAZEN STREET  
EAST ELMHURST, N.Y. 11370

Defendant No. 4

Name DEPUTY ARBY Shield #  
 Where Currently Employed OTIS BANTUM CORRECTIONAL CENTER  
 Address 1600 HAZEN STREET  
EAST ELMHURST N.Y. 11370

Defendant No. 5

Name DEPUTY WILLIAMS Shield #  
 Where Currently Employed OTIS BANTUM CORRECTIONAL CENTER  
 Address 1600 HAZEN STREET  
EAST ELMHURST N.Y. 11370

## II. Statement of Claim

Also with the same address and currently employed  
#6 Captain Morales #7 Captain Pittman #8 Captain Hurley shield #37  
#9 Captain Reid #10 Captain Moore #11 Captain Adams

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. In what institution did the events giving rise to your claim(s) occur?

OTIS BANTUM CORRECTIONAL CENTER  
1600 HAZEN STREET EAST ELMHURST, N.Y. 11370

B. Where in the institution did the events giving rise to your claim(s) occur?

O.B.C.C./C.P.S.U. INTAKE & O.B.C.C. MAIN INTAKE & 3 SOUTH C.P.S.U.  
10 CELL IN C.P.S.U. INTAKE, 11 CELL IN 3 SOUTH, 17 PEN  
IN THE MAIN INTAKE OF O.B.C.C.

C. What date and approximate time did the events giving rise to your claim(s) occur?

OCTOBER 16<sup>TH</sup> 2013 THROUGH OCTOBER 21<sup>ST</sup> 2013  
ON THE 16<sup>TH</sup> OF OCT, 2013 I WAS IN 10 CELL IN C.P.S.U. INTAKE FROM  
9 PM TO 10 PM OCT 17<sup>TH</sup> THE NEXT DAY, ON THE 17<sup>TH</sup> OF OCT 2013  
I WAS IN C.P.S.U. 3 SOUTH HOUSING AREA 11 CELL UP UNTIL THE 18<sup>TH</sup> OF OCT 2013  
2 PM THEN PLACED IN O.B.C.C. MAIN INTAKE #17 PEN UP UNTIL  
THE 21<sup>ST</sup> OF OCT 2013 2:30 PM

D. Facts: Captain Adams was the Area Captain, Captain Moore was the security Captain of such Area and Deputy Patterson was the person that instructed these Captains to allow such matters to take place in the C.P.S.U. intake 10 cell, where I was left handcuffed in a cell that had feces all on the walls & sink & to let Area for 4 hours took cuffs off & left me in the same cell for 24 hours, no water, no food, no visits, no phones, deny me my mental health medication, I was then placed in another cell #113 South C.P.S.U. same conditions of cell Area and denied same things as well food, medication, no water, no phone, no visit, 3 South Area Deputy on the 17<sup>th</sup> at 11<sup>pm</sup> was Deputy Williams the Captain on the 18<sup>th</sup> of Oct, was Captain Morales the Deputy was Dep. Patterson, who was also person who told such Captain to violate my right, I was then placed in O.B.C. main intake #17 Pen, where Captain Pittman was Area Captain on the 18<sup>th</sup> at 11:30<sup>pm</sup> 2013 Deputy Arby was Deputy of Area, on the 19<sup>th</sup> 20<sup>th</sup> & 21<sup>st</sup> of Oct, AM was Captain Hurley, shift #37 and on the PM tour was Captain Reid C.O. Mason was a post intake officer, officers mention between the 18<sup>th</sup>-21 denied me phone, no medication, ~~to~~ left me on a bench for 4 days without a bed or hot water Captain Hurley threw personal property & pictures of family on the trash can, Captain Reid & C.O. denied me food & water.

III. Injuries: I was placed in a housing area where I called my ~~family~~ <sup>family</sup> to inform 311 & Board of Corr.

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received.

wasn't allowed my mental health medication  
sickness, illness verbal abuse, mental anguish  
mental duress, emotions, torture, vomiting  
denied medical treatment

#### IV. Exhaustion of Administrative Remedies:

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted." Administrative remedies are also known as grievance procedures.

A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

Yes ☒ No ☐

If YES, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).

Rikers Island Otis Banting Correctional Center  
1600 Hazen Street, East Elmhurst NY 11370

B. Does the jail, prison or other correctional facility where your claim(s) arose have a grievance procedure?

Yes ☒ No ☐ Do Not Know ☐

C. Does the grievance procedure at the jail, prison or other correctional facility where your claim(s) arose cover some or all of your claim(s)?

Yes ☒ No ☐ Do Not Know ☐

If YES, which claim(s)? \_\_\_\_\_

D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose?

Yes ☒ No ☐

If NO, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

Yes ☐ No ☒

E. If you did file a grievance, about the events described in this complaint, where did you file the grievance?

O.B.C.C. - law library

1. Which claim(s) in this complaint did you grieve? All stated

ABOVE

2. What was the result, if any? nothing resulted

3. What steps, if any, did you take to appeal that decision? Describe all efforts to appeal to the highest level of the grievance process.


Did not respond to grievance  
At no time, which I ~~also~~ put two on the  
grievance Box Here at O.B.C.C.

F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
N/A

2. If you did not file a grievance but informed any officials of your claim, state who you informed,

when and how, and their response, if any: 

no response AT  
All

- G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies. AS FOR THE ILLNESS, VERBAL ABUSE, mental DRESS, mental Anguish and emotional torture I sustained, I WAS ALLOWED TO SEE medical, or see or speak to a mental HEALTH DOCTOR, or sign up for sick call for my medication, and issues. THESE DEPUTIES AND CAPTAINS & OFFICER DENIED ME SUCH ASSISTANCE, would not help me when ask to DO SO. I FILED THREE grievances and call family that notify 3-11, and Board of Correction of such Corruption.

**Note:** You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.

V. Relief:

State what you want the Court to do for you (including the amount of monetary compensation, if any, that you are seeking and the basis for such amount).

I AM SEEKING \$1,250,000 total for mental DRESS, mental Anguish, verbal ABUSE emotional torture, & mental & physical ILLNESS AND DENIAL of medical ASSISTANCE.

VI. Previous lawsuits:

- A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?

Yes ☒ No ☐

On  
these  
claims

- B. If your answer to A is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another sheet of paper, using the same format.)

1. Parties to the previous lawsuit: I.O. #

Plaintiff Tashon Spurgeon 990-13-00006

Defendants Warden Luis RIVERA / Captain Johnson / Deputy Hill / Deputy MARGARITA  
Captain Blake / C.O. Ellis / C.O. Lincoln / C.O. Rothwell

2. Court (if federal court, name the district; if state court, name the county) United States District Court, Southern District of New York

3. Docket or Index number DATE: September 18, 2013 DDC, NO. 10

4. Name of Judge assigned to your case RICHARD J. SULLIVAN

5. Approximate date of filing lawsuit September 18<sup>th</sup> 2013

6. Is the case still pending? Yes ☒ No ☐

If NO, give the approximate date of disposition Still Pending

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) Case still pending.

On  
other  
claims

- C. Have you filed other lawsuits in state or federal court otherwise relating to your imprisonment?

Yes ☐ No ☒

- D. If your answer to C is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff \_\_\_\_\_

Defendants \_\_\_\_\_

2. Court (if federal court, name the district; if state court, name the county) \_\_\_\_\_

3. Docket or Index number \_\_\_\_\_

4. Name of Judge assigned to your case \_\_\_\_\_

5. Approximate date of filing lawsuit \_\_\_\_\_

6. Is the case still pending? Yes ☐ No ☐

If NO, give the approximate date of disposition \_\_\_\_\_

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 28 day of October, 2013

Signature of Plaintiff

Inmate Number

Institution Address

Taha Juma  
990-13-00006  
O.B.C.C.  
1600 Hazen Street  
East Elmhurst N.Y. 11370

**Note:** All plaintiffs named in the caption of the complaint must date and sign the complaint and provide their inmate numbers and addresses.

I declare under penalty of perjury that on this 28 day of October, 2013 I am delivering this complaint to prison authorities to be mailed to the *Pro Se* Office of the United States District Court for the Southern District of New York.

Signature of Plaintiff:

Taha Juma